| | | Application | n Number | 10/053,758 | |
|--|---|--|--|---|-----------------|
| TRANSMITTAL FORM To be used for all correspondence after initial filing) To be used for all correspondence after initial filing) | | Filing Date | | January 18, 2002 | |
| | | First Named Inventor | | Cech, Thomas | |
| | | | | 1646 | |
| be used for all correspondence after init | (lai Illiriy) | Art Unit | Name | | |
| | | Examine | | 217000 000000115 | |
| otal Number of Pages in This | } | Attorney | Docket Number | 015389-002980US | |
| ubmission | FNC | LOSURES | (Check all that appl | γ) | |
| | Drawi | | | After Allowance Communication to Group | |
| Fee Transmittal Form | _ | | | Appeal Communication to Board of Appeals and Interferences | |
| Fee Attached | | icensing-related Papers | | Appeal Communication to Group (Appeal | |
| Amendment/Reply | Petition | on | | Notice, Brief, Reply Brief) | |
| After Final | Petition to Convert to a Provisional Application | | Proprietary Information | | |
| Affidavits/declaration(s) | Appo unde | opointment of Associate Attorney nder 37 CFR § 1.23(b) | | Status Letter | |
| Extension of Time Request | | ninal Disclair | ner | Other Enclosure(s) (please identify below): | |
| Extension of time respect | Request for Refund | | | Return Postcard | |
| _ , 1 | | CD, Number of CD(s) | | | |
| ☐ Information Disclosure Statement | | | | the size of to charge any additional fee | s to Depos |
| Classified Copy of Priority | | The Commissioner is authorized to charge any additional fees to Depos Account 20-1430. | | | |
| Response to Missing Parts/ Incomplete Application | | | , | | |
| Response to Missing Parts | 1 | | | | |
| | | | ATTORNI | Y OR AGENT | |
| SI | GNATUR | E OF APPI | LICANT, ATTORNI | -1, | |
| Firm Townsend and | | u and Ole | Reg | . No. 42,271 | |
| or Scott L. Ausen | | | | | |
| Signature | lule | while | | | |
| Date 10-06-03 | > | | | NAME AND INC | |
| | | | OF TRANSMISSIO | | ufficient posta |
| I hereby certify that this correspondence is be as first class mail in an envelope addressed t | ing facsimile o: Commissi | e transmitted to ioner for Pater | o the USPTO or depositents, P.O. Box 1450, Alexa | ed with the United States Postal Service with su andria, VA 22313-1450 on the date shown below | w. |
| | | | | | |
| Typed or printed name Nicole M. | Wartell | | | Date | |